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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0551-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	0308
	First Named Inventor	LARRY R. WATKINS
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

HUNTING ARROWHEAD WITH BLEEDER RING

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name **H. GORDON SHIELDS**

Address **7830 NORTH 23RD AVENUE**

Address

City **PHOENIX**

State **AZ**

ZIP **85021**

Country **U.S.A.**

Telephone **(602) 995-0490**

Fax **(602) 995-0876**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

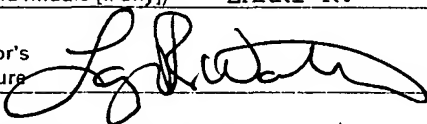
Given Name

(first and middle [if any]) **LARRY R.**

Family Name

or Surname **WATKINS**

Inventor's
Signature



Date

07/18/2003

Residence: City **PHOENIX**

State **AZ**

Country **USA**

Citizenship **USA**

Mailing Address **6749 NORTH 14TH DRIVE**

Mailing Address

City **PHOENIX**

State **AZ**

ZIP **85013**

Country **USA**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

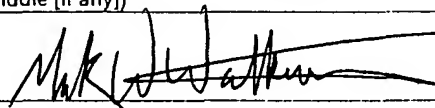
MARK W.

Family Name

or Surname

WATKINS

Inventor's
Signature



Date

7/20/2003

Residence: City **FLAGSTAFF**

State **AZ**

Country **USA**

Citizenship **USA**

Mailing Address **2325 NORTH KRAMER**

Mailing Address

City **FLAGSTAFF**

State **AZ**

ZIP **86001**

Country **USA**

☒ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

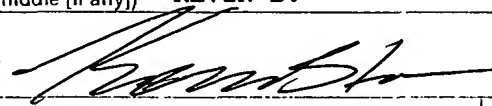
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Address 7830 NORTH 23RD AVENUE			
Address			
City PHOENIX	State AZ	ZIP 85021	
Country U.S.A.	Telephone (602) 995-0490	Fax (602) 995-0876	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) KEVIN B.		Family Name or Surname CALL	
Inventor's Signature 		Date 7-20-03	
Residence: City FLAGSTAFF	State AZ	Country USA	Citizenship USA
Mailing Address 1530 WEST SCHULTZ PASS ROAD			
Mailing Address			
City FLAGSTAFF	State AZ	ZIP 86001	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto			

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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	LARRY R. WATKINS
Title	HUNTING ARROWHEAD WITH BLEEDER RING
Group Art Unit	
Examiner Name	
Attorney Docket Number	0308

I hereby appoint:

☐ Practitioners at Customer Number →

Place Customer
Number Bar Code
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OR
☒ Practitioner(s) named below:

Name	Registration Number
H. GORDON SHIELDS	23,099

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

<input checked="" type="checkbox"/> Firm or Individual Name	H. GORDON SHIELDS				
Address	7830 NORTH 23RD AVENUE				
Address					
City	PHOENIX	State	AZ	Zip	85021
Country	U.S.A.				
Telephone	(602) 995-0490	Fax	(602) 995-0876		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	LARRY R. WATKINS
Signature	
Date	07/18/2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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PTO/SB/81 (02-01)

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Attorney Docket Number	0308

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name MARK W. WATKINS

Signature

Date

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Attorney Docket Number	0308

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☒ Firm or
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Telephone (602) 995-0490 Fax (602) 995-0876

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SIGNATURE of Applicant or Assignee of Record

Name KEVIN B. CALL

Signature

Date

7-20-03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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